




PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Docket Number (Optional) 393032030500	
Application Number 10/052,838		Filed January 17, 2002	
For DISCRIMINATOR FOR DIFFERENTLY MODULATED SIGNALS, METHOD USED THEREIN, DEMODULATOR EQUIPPED THEREWITH, METHOD USED THEREIN, SOUND REPRODUCING APPARATUS AND METHOD FOR REPRODUCING ORIGINAL MUSIC DATA CODE			
Art Unit 2837		Examiner Marlon T. Fletcher	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 \$ 120.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> . I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.			
		Registration number if acting under 37 CFR 1.34	<u>48,231</u>
 Signature		<u>February 18, 2005</u> Date	
<u>Mehran Arjomand</u> Typed or printed name		<u>(213) 892-5630</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

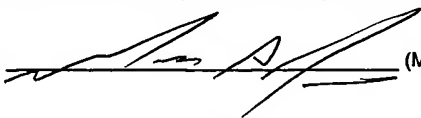
02/24/2005 TLUU11 00000002 031952 10052838

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV506674684US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 18, 2005

Signature:



(Marco Jimenez)

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